Board of Community Health Meeting March 10, 2022

Members Present

Members Absent

Norman Boyd Roger Folsom Russell Crutchfield David Crews Anthony Williamson Nelva Lee Cynthia Rucker Russ Childers Kenneth Davis

The Board of Community Health held its meeting via Zoom teleconference. (An agenda and a List of Attendees are attached hereto and made an official part of these Minutes as Attachments #1 and #2). Chairman Norman Boyd presided and called the meeting to order at 10:30 a.m.

Minutes

The Minutes of the February 10, 2022 meeting were unanimously approved.

Opening Comments

None to report.

Care Management Committee Charter

Anthony Williamson, Care Management Committee Chairman presented to the Board the Committee Charter for approval.

Roger Folsom MADE a MOTION to approve the Care Management Committee Charter. Russell Crutchfield SECONDED the MOTION. ON THE MOTION, the yeas were 9 nays 0, abstained 0, and the MOTION was APPROVED.

Commissioner's Report

Commissioner Noggle thanked the Board, members of the public and staff for their participation via Zoom.

The following updates were provided to the Board:

Budget

- The House released the FY23 budget recommendations.
- Net change so far, reduction of \$154 million in state funds due to an extension of the Public Health Emergency (PHE).
- State funds increased Federal Medical Assistance Percentage (FMAP) for another quarter.
- March 14, Senate budget hearing.
- Received final approval from Centers for Medicare and Medicaid Services (CMS) for our appendix K, which includes a rate increase for some providers for the New Options Waiver (NOW) and Comprehensive Supports Waiver Program (COMP).
- Medicaid Enterprise System Transformation (MEST) module began implementation on the provider module.

Staff announcements:

- Stacey Hillock, Certificate of Need (CON) Designee
- Karesha B. Laing, Interim Executive Director, Office of Health Planning
- Paul Norman, General Counsel (effective March 16)
- Recognition for employees' years of service milestones.

Brian Dowd, Deputy Executive Director, Medical Assistance Plans Division presented to the Board for final adoption the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Adjustment Public Notice (amended).

Effective January 14, 2022, pending Centers for Medicare and Medicaid Services (CMS) approval, DCH proposed to amend the PRTF rates based on facility submitted 2020 audited cost reports in two parts. The first part was in accordance with the behavioral health policy manual for PRTF coverage. The second part was in accordance with the co-occurring behavioral health and autism spectrum disorder policy manual for PRTF coverage.

DCH proposed removing cost ceilings associated with PRTF rate setting and applied a 5% inflation factor to the Behavioral Health Part 1 rates. Hold harmless provisions in the State Plan were proposed for any facility that experienced a significant decrease in rate adjustment.

An opportunity for public comment was held on February 16, 2022 at 11:00 a.m. via Zoom. Written comments were due on or before February 23, 2022.

No oral comments were received. Written comments were received from the following:

 Cheryl Dresser with The Georgia Alliance of Therapeutic Services. Ms. Dresser thanked DCH and the Board for amending the rate adjustments in response to oral and written concerns submitted. Ms. Dresser noted that the amended public notice demonstrates the viability of the public notice process and looked forward to the Board's final adoption of the rate adjustment.

Mr. Dowd respectfully asked for the Board's favorable consideration of final adoption.

Nelva Lee MADE a MOTION to approve for final adoption the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Adjustment Public Notice (amended). Kenneth Davis SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Adjustment Public Notice (amended) is attached hereto and made an official part of these minutes as Attachment #3).

Ryan Loke, Deputy Commissioner & Chief Health Policy Officer presented to the Board for final adoption the Medical Assistance Plans, State Plan Amendment: Advancing Innovation to Deliver Equity (AIDE) Public Notice.

Pending Centers for Medicare Medicaid Services (CMS) approval, the Department proposes to implement over the next couple months, a new value-based, hospital directed payment program. This is the first of a multi-step series.

The goal of this program is to build upon advancing quality, accountability, and transparency.

Eligible hospitals are defined as state-owned acute care hospitals, or non-state governmental, individual acute care hospitals providing more than 63,000 total Medicaid inpatient days based on the 2020 Medicare cost report and has over 100,000 total In-State Medicaid inpatient days as reported in the 2021 DCH Disproportionate Share Hospital (DSH) Final Payment Eligibility Report.

Payment of At-Risk Dollars by Program Year

Ten percent of program payments will be at risk based on performance on ten quality measures.

An opportunity for public comment was held on February 17, 2022 at 10:30 a.m. via Zoom. Written comments were due on or before February 24, 2022.

No oral comments were received. Seven written comments were received from the following:

- Paul Hull, Vice President, Regional Advocacy American Cancer Society Cancer Action Network, Inc.
- Michael Purvis, FACHE, CEO, Candler County Hospital

- Robert A. Gabbay, MD, PhD, Chief Science and Medical Office, American Diabetes Association
- John Haupert, CEO, Grady Health System
- Jimmy Lewis, CEO, HomeTown Health, LLC
- Carie Summers, CFO and Senior Vice President, Healthcare Financing, Georgia Hospital Association
- Katrina Keefer, CEO and Allen Butcher, CFO, Augusta University Health System

Responders expressed support for the Advance Innovation to Delivery Equity program.

DCH Response: The Department appreciates the support and thanks the commenters for their responses.

Mr. Loke respectfully asked for the Board's favorable consideration of final adoption.

Roger Folsom MADE a MOTION to approve for final adoption the Medical Assistance Plans, State Plan Amendment: Advancing Innovation to Deliver Equity (AIDE) Public Notice. Russ Childers SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Advancing Innovation to Deliver Equity (AIDE) Public Notice is attached hereto and made an official part of these minutes as Attachment #4).

Karesha Berkeley Laing, Interim Executive Director, Office of Health Planning presented to the Board for final adoption the Rules and Regulations for Health Planning, Administration, Chapter 111-2-1.

These rules and regulations are necessary in order to reflect legislative amendments to the State Health Planning and Development Act, to correct grammar, to provide clarity, and to modernize the rules.

The proposed changes make updates to the functions of the Office of Health Planning, as follows:

- to include references to utilizing technical advisory committees to prepare and revise a draft State Health Plan;
- to seek advice from technical advisory committees, at the department's discretion;
- to provide for a fee exemption for a Certificate of Need application filing by a rural county hospital;
- to study, recommend requirements for, and track the amount of uncompensated indigent and charity care required by each type of health care facility; and,
- to empower the Commissioner to establish and abolish technical advisory committees in consultation with the board in order to inform effective strategy development and execution.

An opportunity for public comment was held on February 15, 2022 at 10:00 a.m. via Zoom. Written comments were due on or before February 18, 2022, which was extended until February 25, 2022, to mitigate any issues associated with an email address error published in the Department's public notice.

No oral comments were received. One written comment was received from the following:

 Keri F. Conley, General Counsel & Senior Vice President, Health Care Policy Georgia Hospital Association (GHA).

GHA recommended that the Department define the term "rural county" as it is defined in O.C.G.A. § 31-6-2(32) and to define the term "health care facility" as it is defined in O.C.G.A. § 31-6-2(17) since Proposed Rule 111-2-1-.02(2)(h) exempts hospitals located in a rural county from any Certificate of Need application fees and Proposed Rule 111-2-1.02(2)(k) adds to the Department's functions the study of the amount of uncompensated and charity care provided by each type of health care facility.

DCH Response: The Department declined to revise Proposed Rule 111-2-1 et seq., as it pertains to a definition of "rural county" and "health care facility". These terms are already defined in the proposed revisions to Rule 111-2-2 et seq., and it is under those rules that these terms have practical application as it relates to certificate of need application fees and indigent and charity care commitments. Specifically, "rural county" already is defined in Proposed Rule 111-2-2-.01(52) and the definition of "health care facility" as reflected in HB186, is captured in Proposed Rule 111-2-2-.01(28).

Ms. Berkeley Laing respectfully asked for the Board's favorable consideration of final adoption.

David Crews MADE a MOTION to approve for final adoption the Rules and Regulations for Health Planning, Administration, Chapter 111-2-1. Cynthia Rucker SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Rules and Regulations for Health Planning, Administration, Chapter 111-2-1 is attached hereto and made an official part of these minutes as Attachment #5).

Karesha Berkeley Laing, Interim Executive Director, Office of Health Planning presented to the Board for final adoption the Rules and Regulations for Health Planning, Certificate of Need (CON), Chapter 111-2-2.

These rules and regulations are necessary in order to reflect legislative amendments to the State Health Planning and Development Act, to correct grammar, to provide clarity, and to modernize the rules. The proposed changes make updates to the health planning regulations, as follows:

- to revise provisions relating to certificate of need requirements;
- to revise and provide for new definitions relative to health planning and development;
- · to prohibit certain actions relating to medical use rights;
- to revise provisions regarding when a certificate of need is required;
- to authorize destination cancer hospitals to be converted to general cancer hospitals;
- to revise and provide for additional exemptions to certificate of need requirements;
- to provide for requests and objections to letters of determination that an activity is exempt or excluded from certificate of need requirements;
- to provide for annual reports to be made publicly available; and,
- to allow for electronic filing.

An opportunity for public comment was held on February 15, 2022 at 11:00 a.m. via Zoom. Written comments were due on or before February 18, 2022, which was extended until February 25, 2022, to mitigate any issues associated with an email address error published in the Department's public notice.

No oral comments were received. One written comment was received from the following:

 Keri F. Conley, General Counsel & Senior Vice President, Health Care Policy Georgia Hospital Association (GHA).

GHA recommended adding the phrase "or as directed by the Department" wherever the Proposed Rules require submission via the web portal in order to avoid challenges as to whether a document was received prior to the statutory deadline. A further recommendation was made to either revise the rules or post additional instructions on the portal to address a scenario when the web portal is not available.

DCH Response: In order to avoid confusion, and to streamline processes by ensuring there is a single method for document submission, the Department declined to add the recommended language. In terms of a contingency plan for the rare occasions when the web portal is unavailable, filers should send their timely submissions, along with a screenshot showing the unavailability of the portal, to OHP.Help@dch.ga.gov for handling. The date and time stamp of such email will serve as the filing date and time stamp. The Department's website will be updated to reflect these instructions.

Ms. Berkeley Laing respectfully asked for the Board's favorable consideration of final adoption.

Cynthia Rucker MADE a MOTION to approve for final adoption the Rules and Regulations for Health Planning, Certificate of Need (CON), Chapter 111-2-2. Kenneth

Davis SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Rules and Regulations for Health Planning, Certificate of Need, Chapter 111-2-2 is attached hereto and made an official part of these minutes as Attachment #6).

New Business/Closing Comments

None to report.

Adjournment

There being no further business to be brought before the Board, Chairman Norman Boyd adjourned the meeting at 10:59 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 10th DAY OF

March, 2022.

Russell Crutchfield

Secretary

Norman Boyd Chairman

Official Attachments:

#1 Agenda

#2 List of Attendees

- #3 Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Adjustment Public Notice (amended)
- #4 Medical Assistance Plans, State Plan Amendment: Advancing Innovation to Deliver Equity (AIDE) Public Notice
- #5 Rules and Regulations for Health Planning, Administration, Chapter 111-2-1
- #6 Rules and Regulations for Health Planning, Certificate of Need (CON), Chapter 111-2-2